



# **Grant Application: Residual 5303/5304 Funding (SFY21)**

Submissions accepted from August 24 through September 21, 2020

## **Grant Application Overview**

TDOT's Multimodal Transportation Resources Division is announcing an opportunity for Metropolitan Planning Organizations and Rural Transit Agencies to compete for Residual Section 5303/5304 Program funding to complete transit-related planning activities. For projects submitted by MPOs, coordination with partner transit agencies is required.

The funding being distributed is not part of, nor will it impact, related annual formula funding distributions. Instead, this Call for Projects will expend residual funds, which will be distributed after review of project proposals.

To apply for funding, applicants should fill out this form and submit the PDF per the instructions below. Applications will then be reviewed and scored to prioritize funding.

Additional information regarding the Call for Projects can be found on the [Fact Sheet](#).

## **Submitting the Grant Application**

Once completed, please submit the application to the Office of Public Transportation by attaching the filled PDF to an e-mail to [TDOT.MultimodalAdmin@tn.gov](mailto:TDOT.MultimodalAdmin@tn.gov). If the attachment is larger than 15GB (server size limit) please contact the Office of Public Transportation to coordinate submission via TNCloud.

## **Deadline**

Grant Applications must be received by 11:59pm Central on 9/21/2020 to be considered.

## **Questions**

Questions may be directed to Kaitlyn McClanahan at [Kaitlyn.McClanahan@tn.gov](mailto:Kaitlyn.McClanahan@tn.gov), or 615-532-5835

## Grant Application: Residual 5303/5304 Funding (SFY21)

Application Checklist		
Applicants should use this checklist to ensure that all required information and attachments are completed in their entirety before submission		
Application Sections		Page
<input type="checkbox"/>	APPLICANT INFORMATION	3
<input type="checkbox"/>	PROJECT INFORMATION	3 - 4
<input type="checkbox"/>	PROJECT BUDGET	4
<input type="checkbox"/>	PROJECT TIMELINE	4
<input type="checkbox"/>	PROJECT BENEFITS – RIDERSHIP & MOBILITY	5
<input type="checkbox"/>	PROJECT BENEFITS – COMMUNITY RESILIENCE	5
<input type="checkbox"/>	LOCAL PARTICIPATION & COORDINATION	6
<input type="checkbox"/>	COMPLIANCE STATUS	6
<b>Required Attachments (pg. 7)</b>		<b>File Name:</b>
<input type="checkbox"/>	DETAILED PROJECT BUDGET	
<b>5303 Funding Required Attachments</b>		
<input type="checkbox"/>	LETTER OF SUPPORT FROM PARTNER TRANSIT AGENCY	
<input type="checkbox"/>	COMMITMENT LETTER FOR LOCAL FUNDS	
<b>Supplemental Attachments</b>		<b>File Name:</b>
<input type="checkbox"/>	DETAILED PROJECT SCHEDULE	
<input type="checkbox"/>	LOCAL SUPPORT (pg. 6) <i>Ex. Letters of support from relevant local agencies</i>	
<input type="checkbox"/>	OTHER (pg. 6) <i>Ex. Planning studies describing project need, materials from public outreach campaigns, etc</i>	

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### Applicant Information

<b>Applicant Name</b>	Transit Agency:		
	MPO (if applicable):		
<b>Economically Distressed Area</b>	Will the proposed planning project include one or more <a href="#">distressed counties</a> , or <a href="#">opportunity zones</a> ?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Distressed Counties:		
	Opportunity Zones:		
<b>Contact Information</b> <i>Please identify the Project Manager and their contact information</i>	Name:		
	Title:		
	E-mail:		
	Phone:		
<b>Carbon Copy</b> <i>Please identify anyone to be copied on correspondence</i>	Name:		E-mail:
	Name:		E-mail:
	Name:		E-mail:

### Project Information

<b>Project Name</b>	
<b>Study Area</b> <i>Please explain the locations that will be considered in the planning study</i>	
<b>Project Type</b> <i>Mark all that apply</i>	<input type="checkbox"/> Strategic Planning <input type="checkbox"/> Comprehensive Operational Analysis <input type="checkbox"/> Systems Planning, Corridor-level Alternatives Analysis, or Network Redesign <input type="checkbox"/> Transit Needs Assessments <input type="checkbox"/> Fare Structure Analysis <input type="checkbox"/> Transit Oriented Development (TOD) Planning <input type="checkbox"/> Coordinated Public Transit Human Services Transportation Planning <input type="checkbox"/> Feasibility Studies for New Transit Service, including Service Plan Development <input type="checkbox"/> Planning and Design for Capital Projects, including: <ul style="list-style-type: none"> <li><input type="checkbox"/> Bus Rapid Transit and Fixed Guideway Stations</li> <li><input type="checkbox"/> Transit Centers</li> <li><input type="checkbox"/> Mobility Hubs, providing access for various modes of transportation and including curb management delineating how each mode accesses facilities</li> <li><input type="checkbox"/> Transfer Point and Bus Stop Improvements</li> <li><input type="checkbox"/> Transit Fueling and Electric Charging Stations</li> <li><input type="checkbox"/> Multimodal Infrastructure Improving Access to Facilities, including Bicycle and Pedestrian Improvements</li> <li><input type="checkbox"/> Other Strategic Capital and Facility Projects</li> </ul>

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<b>Project Description</b> Please describe the proposed planning project, and its goals		
<b>Project Budget</b>		
<b>Proposed Project Budget</b>	Total Project Budget:	
	Federal (80%):	
	State ( <u>5303</u> - 10%, <u>5304</u> - 20%):	
	Local ( <u>5303</u> - 10%):	
<b>Project Timeline</b>		
<b>Timeline</b> Please explain the anticipated project timeline  If detailed schedule documents exist that are not well captured in text, please attach these additional documents to the application, while still providing a basic timeline in this text box		

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### Project Benefits

#### **Ridership and Mobility**

*Please describe how the proposed planning project will prepare the agency to improve ridership, the rider experience, or enhance mobility*

#### **Community Resilience**

*Please describe how the proposed planning project will consider social and environmental justice, energy efficiency, mode shift/VMT (vehicle miles travelled) reductions, or resilience to natural disasters and climate impacts*

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### Local Participation and Coordination

#### Local Support

*Please describe any efforts that have been undertaken to assess support for the project from local agencies and the broader community*

*If support has been documented in formal letters or declarations, or if there is documentation of meaningful public engagement efforts, please attach them to this application*

### Compliance Status

#### Compliance Status

*If the applicant or the partner transit agency has any overdue corrective actions that are the result of past FTA or TDOT compliance reviews or audits, please explain.*

*If not, please mark "N/A"*

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### Required Attachments

<b>Attachment 1: Detailed Project Budget</b>	The Detailed Budget should include a breakdown of the costs associated with all activities that are reasonably foreseeable and expected to be reimbursed with Residual 5303/5304 funds. Please be as detailed as possible with the proposed budgeted amounts.
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### 5303 Funding Required Attachments

<b>Attachment 2: Letter of Support from Partner Transit Agency</b>	Please attach a Letter of Support from the partner transit agency confirming their support and participation in the proposed project
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<b>Attachment 3: Commitment Letter for Local Funds</b>	Please attach a Commitment Letter from the governing body confirming the availability and source of local funds to support the proposed. Be sure to indicate which fiscal year budget the funds will be appropriated in to support the project timeline.
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### Signature

<b>Signatory Authority Signature</b>	<b>Date</b>